

May 11, 2015

The Honorable Sylvia Burwell Secretary U.S. Department of Health and Human Services 200 Independence Avenue, SW Washington, D.C. 20201

Dear Secretary Burwell,

We write today to express our strong support for Programs of All Inclusive Care for the Elderly (PACE) and to encourage the Administration to undertake actions to promote and expand this proven, cost-effective, and high-quality care model.

As you know, PACE programs provide comprehensive, coordinated health and long-term services and supports for some of our nation's most vulnerable citizens — individuals 55 or older who qualify for nursing home care. These individuals have been diagnosed with a complex mix of chronic illnesses and functional or cognitive impairments, such as dementia, that inhibit their ability to live independently. By enrolling in PACE, however, they access high-quality, integrated care that allows them to maintain their health, avoid costly medical complications, and live in their communities rather than in nursing homes.

As other health care delivery system reform efforts are underway, now is an opportune time to build on PACE's record of success in providing coordinated, high-quality, cost-effective care for those who rely on Medicare and Medicaid. Current regulations and eligibility limitations, however, are preventing PACE from innovating and growing in order to meet this challenge. We urge you to adopt the following regulatory reform and demonstration project recommendations so PACE can better serve disabled and chronically-ill individuals:

Publish revised PACE regulations and release evaluation report

In its fall 2012 Regulatory Agenda, the Centers for Medicare and Medicaid Services (CMS) published a Notice of Proposed Rulemaking to revise the PACE regulation to begin in July 2013. This deadline has most recently been extended to spring 2015. We are concerned that the delay of this rule has created uncertainty for the PACE community and has limited their ability to innovate and grow. Please assure us that CMS will meet the most recent deadline and issue a revised PACE regulation this spring. In addition, it is our understanding that CMS has completed an evaluation of the for-profit PACE demonstration project. We also ask you to release that report expeditiously.

Update the PACE application and waiver process

We acknowledge that updating PACE via the regulatory process can take several months or even years to be finalized. In the interim, PACE operators face a lengthy application process, which

increase start-up costs and discourage sponsors from developing new PACE programs. We urge CMS to modernize its internal processes to expedite waiver requests, provider applications and service area expansions in order to facilitate PACE growth in the short-term. Please let us know what actions CMS is taking toward this end.

Consider the PACE model for a demonstration project serving similar populations

We understand that the Center for Medicare and Medicaid Innovation (CMMI) is considering a demonstration project to test a PACE-like model with younger, vulnerable populations. Please tell us your plans for moving this initiative forward and when a Request for Proposal (RFP) will be issued.

We thank you, in advance, for a timely response to our concerns and trust we can count on your continued commitment to PACE.

Sincerely,

Pat Toomey

U.S. Senator

Thomas R. Carber

U.S. Senator

Pat Roberts

U.S. Senator

Bill Cassidy

U.S. Senator

Mark R. Warner

U.S. Senator

Charles E. Schumer

U.S. Senator

Michael Bennet

U.S. Senator

John Hoeven

U.S. Senator





U.S. Senator

U.S. Senator

Sheldon Whitehouse U.S. Senator

Maria Cantwell

U.S. Senator

U.S. Senator

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U.S. Senator

Marco Rubio U.S. Senator

Jerry Moran U.S. Senator

Chris Coons

U.S. Senator

Kirsten E. Gillibrand U.S. Senator

Bill Nelson
U.S. Senator

Bill Nelson
U.S. Senator

Jack Reed
U.S. Senator

Cory Gardner
U.S. Senator

U.S. Senator

Lamar Alexander U.S. Senator